On-Provider Review Protocol:
A Guide for Providers and Reviewers
Revised June 2009

State of Alaska
Department of Health and Social Services
Senior and Disabilities
Services
Quality Assurance Unit

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Introduction:
In compliance with federal requirements, The State of Alaska, Senior and Disabilities Services (SDS) has initiated the development of protocols to conduct provider reviews of its programs. One of the major goals of this endeavor is to conduct regular provider reviews of all Medicaid and grant funded service providers on a continuous basis.

Purpose:
The purpose of the provider reviews is to improve the performance of Medicaid and grant funded services, to evaluate provider and recipient compliance with Medicaid and grant program rules and regulations, to assist in development of Policies and Procedures and to identify potential areas for training and program improvements. The provider reviews will also have a major teaching component, which will be provided through technical assistance and direct and on-going contact between the state and the providers.

Reviewers:
Teams composed of Senior and Disabilities Services employees will conduct the provider reviews. The information that will be gathered by the reviewers is confidential; however the reviewers are mandatory reporters and as such will abide by Statutes AS 47.24.010 and AS 47.17.010.

Methodology:

Open Forum
The state will provide an opportunity for the community to voice their opinions, questions and concerns regarding Home and Community Based Waiver (HCBW), Grant and Personal Care Attendant (PCA) services.

Provider Selection
Initially, a small sample of providers will be selected. Site reviews of other providers will be conducted at a later time.

Desk Review
A desk review of all documentation in SDS files will precede the site review. During this process, a representative sample of recipients, selected on the basis of total number served and the type of services offered by the provider, will be identified for interviews and for on-site record reviews.

Notification and Scheduling
The selected providers are notified in writing of having been selected for the provider review. The notification outlines the necessary steps taken to schedule the entrance conference between the review team and the provider and includes the list of recipients and direct service employee records to be reviewed and interview schedule.

Entrance Conference
The entrance conference is the initial meeting between the review team and the provider, to explain the review process.

Individual Recipient Records Review
The review team examines the recipients' records to verify that documentation meet state and federal requirements.

Employee Records Review
The review team checks employee records to verify compliance of state and federal requirements.

General Administrative Employees Interview
The review team interviews administrative staff to ascertain general provider policies and procedures.

Direct Service Employees Interviews
The review team interviews employees at their place of employment concerning recipient care and services.

Recipient Interviews
The review team interviews recipients to ascertain satisfaction of services.

Exit Conference
After the review teams complete the record reviews and interviews, an exit conference with essential staff is scheduled. At this time, the review team will report what was found and any immediate concerns are resolved and acknowledge best practices.

Draft Final Report
Thirty days following the exit conference the state will provide the provider with the draft final report outlining the findings discussed during the exit conference.

Quality Improvement Plan(s)
The provider has thirty days to address findings and to present the state with an outline of its Quality Improvement Plan(s).

Final Report
Sent to provider following the approval of the Quality Improvement Plan(s) in which the provider has an agreed upon an amount of time to implement the Quality Improvement Plan(s).

Completion Letter
Letter sent after the completion of the Quality Improvement Plan.

Desk Prep and Case Records Review		
Indicator	**Data Source**	**Example Inquiry**
Provider complies with State of Alaska Business Licensing Requirements. *(III.B)*	• Initial Certification Packet • Recertification Packets	Review of Certification and Recertification Packets
Provider complies with all insurance requirements (workers compensation, general liability, automotive, professional, etc). *(III.B)*	• Initial Certification Packet • Recertification Packets	Review of Certification and Recertification Packets
Provider complies with all of the Department of Health and Social Services licensing and certification requirements. *(III.B)*	• Initial Certification Packet • Recertification Packets	Review of Certification and Recertification Packets
There exists a typical timeline from recipient referral/intake to provision of services. Plan of Care is developed promptly after receiving Level of Care. *(I.B.1b)*	• Screening • Plan of Care • Claims Processing	Case Records Review Database Review
Services are initiated promptly when the individual is determined eligible and selects services. *(I.B.4)*	• Plan of Care Approval • SDS Internals Databases	Case Records Review Desk Review
Recipient preferences, personal goals, needs, and abilities are gathered and used in developing the service plan and assessment is updated annually or when there is significant change in the individual condition or circumstances. *(II.A.1)*	• PCAT/CAT Assessment • Plan of Care	Case Records Review Desk Review
Service Plan comprehensively addresses recipients identified need for service, health care and other services. *(II.A.4)*	• PCAT/CAT Assessment • Plan of Care	Case Records Review Desk Review
Service provider has incident policies to respond to critical incidents and suspected abuse; they train their staff in mandatory reporting requirements, and follow SDS background check policy for all employees. *(IV.B)*	• Initial Certification Packet • Recertification Packets	Desk Review Background check unit database
Providers have an emergency response and recovery plan. *(IV.F))*	• Initial Certification Packet • Recertification Packets	Review of Certification and Recertification Packets
Services are provided in accordance with written service plan. *(II.B.2)*	• Claims Processing • Plan of Care	Case Records Review Desk Review
Recipient satisfaction with services data is collected on a regular basis. *(II.B.3)*	• Initial Certification Packet • Recertification Packets	Review of Certification and Recertification Packets
Services are well documented and provider submits claims accurately for services that were performed. Payments are made promptly in accordance with program requirements. *(VII.E)*	• Claims Processing • Plan of Care	Case Records Review Desk Review

Individual Recipient Records Review		
Indicator	**Data Source**	**Example Inquiry**
Provider maintains individual client records that are stored in a manner that prevents unauthorized access. *(II.A.5)*	• Recipient Records	Review of Recipient Records
Individual client records include all of the documentation required for a waiver, PCA and/or grant services. *(II.A.1) (II.A.4) (IV.A) (IV.C) (V.B)*	• Recipient Records	Review of Recipient Records

There is a typical timeline from recipient referral/intake to provision of services. Plan of Care is developed promptly after receiving Level of Care. *(IB.1b)*	• Recipient Records	Review of Recipient Records
Services are delivered promptly after they are authorized. *(I.B.4)*	• Recipient Records	Review of Recipient Records
Each individual client has a current and approved LOC and POC in their chart. There is also evidence that LOC and POC are reviewed annually. *(II.A.1)*	• Recipient Records	Review of Recipient Records
Client records contain client rights and responsibilities, notification of choice, and HIPAA privacy forms. *(II.A.5) (I.B.3) (II.A.3) (V.A)*	• Recipient Records	Review of Recipient Records
Client records contain accurate documentation of each contact and service. Services are provided in accordance with written service plan. *(II.A.4) (VI.B) (II.B.2)*	• Recipient Records	Review of Recipient Records
Providers regularly collaborate among themselves in order to monitor recipient progress and well-being. *(II.B.3)*	• Recipient Records	Review of Recipient Records
Staff and services are responsive to changing circumstances and condition. *(II.B.4)*	• Recipient Records	Review of Recipient Records
Service Plan reflects recipient's needs for safety and welfare and the health and safety of the recipients living arrangements are assessed on a regular basis. *(IV.C)*	• Recipient Records	Review of Recipient Records
Provider informs the recipient about due process rights and grievance procedures. *(V.D) (V.E)*	• Recipient Records	Review of Recipient Records

Employee Records Review		
Indicator	**Data Source**	**Example Inquiry**
Provider retains a unique and complete file for each of its employees.	• Employee Records	Review of Employee Records
The employee record contains all of the documentation required for waiver, PCA and/or grant service provider. *(III.B)*	• Employee Records	Review of Employee Records
The provider complies with background check regulations and retains a copy of approved background checks and variances in its employees' files. *(IV.B)*	• Employee Records	Review of Employee Records
The employee record contains all relevant certificates, degrees, licenses and proof of trainings. *(III.B)*	• Employee Records	Review of Employee Records
General and recipient specific training is provided on a regular basis. *(III.B) (VII.B)*	• Employee Records	Review of Employee Records
Staff at all levels receives supervision. *(III.B)*	• Employee Records	Review of Employee Records
Staff is trained in ways to reduce and access recipient risk. *(IV.B)*	• Employee Records	Review of Employee Records
Staff receives mandatory reporting requirement training. *(IV.B)*	• Employee Records	Review of Employee Records

General Administrative Employee Interview		
Indicator	**Data Source**	**Example Inquiry**
A process exists for dissemination of accessible/recipient-friendly program materials and information. *(I.A)*	• Administrative Staff	What methods are used to disseminate information to general public and potential recipients?
An Intake Specialist is available to provide assistance during application process. *(I.B.1.a)*	• Administrative Staff	Is there an Intake specialist available during application process?
The process of referral/intake to provision of services proceeds in a timely manner. *(I.B.1b) (I.B.4)*	• Administrative Staff	What is the typical timeline from referral/intake to provision of services?
Provider ensured that recipients who are not appropriate for its services are referred to other service providers. *(I.B.2)*	• Administrative Staff	In what ways does your provider ensure that recipients that who are not appropriate for your services are referred elsewhere? How do you refer recipients to other services?
Provider has an established waiting list that is well managed and provides referrals for recipients they are not able to serve right away. *(I.B.2)*	• Administrative Staff	Have you established a waiting list for your services and how are currently on the waiting list? How do you refer recipients to other services when you are unable to provide service due to waitlist?
Provider ensures that recipients have choice in providers and services. *(I.B.3) (II.A.2) (II.A.3)*	• Administrative Staff	How does the provider ensure that the recipients can exercise choice in providers and services available in the community?
Providers are knowledgeable regarding the intent of services and their ability to perform these services. *(III.C)*	• Administrative Staff	How do you ensure that direct service employees understand the intent of services that they provide and are able to provide these services well? What tools are provided direct service staff to help them identity and respond to individual service plans and needs?
Provider ensures that recipients are aware of their rights and responsibilities. *(I.A.3) (II.A.5)*	• Administrative Staff	How do you ensure that the recipients are aware of their rights, responsibilities?
Recipients have a choice in the staff that serves them. *(II.B.2)*	• Administrative Staff	What steps/action do you take if a recipient does not want a specific staff working with them?
There is a system in place to measure recipient's satisfaction, as well as record and tend to their concerns. *(II.B.3)*	• Administrative Staff	How is recipient satisfaction measured? What steps are taken to resolve concerns? How are recipients protected from retaliation?
Providers regularly collaborate in order to monitor recipient's progress, common needs being met, and well-being. *(II.B.2) (II.B.3)*	• Administrative Staff	How often do you have contact with care coordinator to coordinate services or report on recipient's progress or well-being?
Staff and services are responsive to changing circumstances and conditions. *(II.B.4)*	• Administrative Staff	What actions/steps do you take when you notice change in recipient's circumstances and conditions?
Providers take steps to ensure that its employee turnover is low. *(III.A)*	• Administrative Staff	What is your employee turnover rate? What do you do to ensure that employee turnover remains low?
Provider ensures that recipient is able to contact care coordinator as needed. *(II.B.1)*	• Administrative Staff	How to you ensure that recipients are able to contact heir care coordinator, family, and friends when they want or need to?

General and recipient specific training is provided on a regular basis. *(III.B)*	• Administrative Staff	What training programs have been offered to the employees in the last six months; which were required? How is recipient specific training identified and provided?
Employees are provided with adequate supervision and support. *(III.B)*	• Administrative Staff	How are employees supervised and supported?
Provider has a system in place to monitor and respond to critical incidents, including suspected abuse, neglect, and exploitation. *(IV.B)*	• Administrative Staff	What training has occurred to reduce and assess recipient risk? What are your policy and procedures regarding mandatory requirements for reporting abuse?
Service providers have evidence that policy regarding Mandatory reporting requirements of suspected abuse, neglect and exploitation of recipients is trained and implemented. *(IV.B)*	• Administrative Staff	What are your policy and procedures regarding Mandatory Reporting requirements? How and how often do you train staff regarding mandatory reporting?
Provider follows SDS Background Check policy for all employees. *(IV.B)*	• Administrative Staff	Do you have policy and procedure regarding Background Checks for all employees? Do all employees have current background checks?
Systems are in place to safeguard recipients, prevent accidents and address safety issues. *(IV.C)*	• Administrative Staff	How is recipient specific training identified and provided? To what extent are you assessing consumer living arrangements, and its safety and health issues? What steps do you take to safeguard consumers, prevent accidents and address safety issues?
The provider has an emergency response and recovery plan. *(IV.F)*	• Administrative Staff	Do you have an emergency response and recovery plan?
Provider ensures that each recipient understand and is able to exercise their rights freely. *(V.A) (V.B) (V.C)*	• Administrative Staff	How do you ensure that the recipients are aware of their rights, responsibilities?
Provider fosters recipient participation in the decisions concerning their own care. *(V.B)*	• Administrative Staff	What steps/actions do you take to involve recipients in decisions regarding their own care? How are recipients' personal preference incorporated in their daily activities?
Provider make an effort to explain the decision to waive recipient's right to actively participate in their own care and provided appropriate referral. *(V.C)*	• Administrative Staff	What steps/actions do you take if you notice that recipients become increasingly unable or unwilling to participate in making decisions on their own behalf? How do you help recipients continue to be involved in decisions concerning their own care?
Provider complies with non-discrimination policies. *(III.B)*	• Administrative Staff	How do you ensure compliance with non-discrimination on basis of race, color, age, national origin, gender, political belief, religious creed or handicap?
Provider informs the recipient about their grievance policy. *(V.E)*	• Administrative Staff	Do you have a grievance policy? How do you protect recipients who voice concerns from retaliation?
There is an established system to record recipient's concerns, respond to concerns, and to measure recipient satisfaction. *(VI.A)*	• Administrative Staff	Do you have an established system to record recipient's concerns and measure recipient satisfaction?
Services facilitate recipient's achievement of goals as outlined in their plan. Recipient's needs are met in regard to community involvement. *(VI.B)*	• Administrative Staff	How do services support recipient's achievement of goals in their plan? In what ways do services help recipient meet their needs in regard to community involvement?

Provider has a staff responsible for quality assurance/improvement activities and engages in quality improvement activities regularly. *(VII.A) (VII.B)*	• Administrative Staff	Who is responsible for your provider's quality assurance and quality improvement efforts? Is there a comprehensive plan to address the quality of services?
Providers make efforts to accommodate recipient cultural and ethnic backgrounds. *(VII.C)*	• Administrative Staff	How has your agency accommodated recipients' cultural and ethnic backgrounds?
Recipients are able to participate in staff performance evaluations, satisfaction surveys, quality improvement activities and in the design of new programs. *(VII.D)*	• Administrative Staff	Are recipients able to participate in staff performance evaluations, satisfaction surveys, quality improvement activities and in the design of new programs?
Provider submits claims accurately for services that were performed. *(VII.E)*	• Administrative Staff	What methods and safeguards do you have in place to assure accuracy in submitting claims for services provided?
Provider of agency that bill $5 million or more annually train staff on requirements of the False Claim Act. *(VII.E)*	• Administrative Staff	Do you train your staff on the requirements of the False Claim Act? (for agency that bill $5 million or more annually)

Direct Staff Interview		
Indicator	**Data Source**	**Example Inquiry**
Provider takes steps to ensure that its employee turnover is low. *(III.A)*	• Direct Service Staff	What has been done or can be done by this agency to ensure good retention among staff?
Direct Service employees receive ongoing general and recipient specific training. *(III.B)*	• Direct Service Staff	What kind of ongoing training do you receive? Do your receive training that addresses the individual and specific needs of the recipients?
Employees at all levels receive supervision, support and evaluation. *(III.B) (VII. A) (VII.B)*	• Direct Service Staff	What kind and how often do you receive supervision?
Services provided meet the standards outlined by State and Federal entities. *(III.B)*	• Direct Service Staff	Do you receive a copy of your job description? Are you asked to perform services that are not included in either your job description or the recipient's service plan?
Staff is trained in ways to reduce and assess recipient risk. *(IV.B)*	• Direct Service Staff	What kind of training do you receive that address reducing and assessing recipient risks and health concerns?
Direct service providers engage in on-going health and safety monitoring. *(IV.C)*	• Direct Service Staff	Do you feel safe providing services to the recipient? Would you place one of your family members into the care of this provider?
Service providers have evidence that policy regarding Mandatory reporting requirements of suspected abuse, neglect and exploitation of recipients is trained and implemented. *(IV.B)*	• Direct Service Staff	Have you received training on Mandatory Reporting requirements? How to you understand your agencies policies and procedures around mandatory reporting?
Staff is knowledgeable regarding the intent of services and their ability to perform these services. *(II.B.2) (III.C)*	• Direct Service Staff	What tools are provided to help you identify and respond to individual service plans and recipient needs?
Providers foster recipient participation in the decision concerning their own care. *(V.B) (V.C)*	• Direct Service Staff	In what ways do you involve the recipients in decision concerning their own care and fostering independence?

Provider engages in quality improvement activities. *(VII.B)*	• Direct Service Staff	Do you feel comfortable offering suggestions to your supervisor regarding ideas to provide better care? Does this agency ask staff to find ways to improve the quality of care?
The provider makes efforts to accommodate recipients' cultural and ethnic background. *(VII.C)*	• Direct Service Staff	Does the agency offer cultural diversity training? In what ways does this agency accommodate recipients' cultural and ethnic backgrounds?
Staff is trained regarding the False Claim Act for agencies that bill $5 million or more annually. *(VII.E)*	• Direct Service Staff	Have you been trained and are you familiar with the False Claims Act?

Recipient Interview		
Indicator	**Data Source**	**Example Inquiry**
Recipients are satisfied with their intake and eligibility processes. *(I.A) (IB.1a)*	• Recipient	What is your experience regarding the intake and eligibility processes? Was intake and eligibility understandable and did someone offer to help you?
Recipient received information regarding wide variety of services available within the community. *(I.B.3) (II.A.2)*	• Recipient	Did you receive information about the variety of services available in the community to make choices on your plan of care?
Recipients and caregiver(s) are informed about their rights, responsibilities and grievance procedures and are familiar with the Client Rights Form and Waiver Program Notices of Action, Appeals and Hearings. *(V.A) (V.D) (V.E)*	• Recipient	What were you told about your rights, responsibilities, appeals, fair hearings, and grievance procedures?
Plans of care reflect recipient's goals, needs and abilities. Recipients participate in planning of their services. *(II.A.1) (II.A.4)*	• Recipient	Were your goals, needs and abilities gathered and used in development of the Plan of Care? Did you participate in the planning of your services?
Recipients are satisfied with the services that they receive. *(III.C) (VI.A) (VI.B)*	• Recipient	Are you satisfied with the services that you currently receive?
Services are responsive to recipients' changing circumstances and conditions. *(II.A.1) (II.A.4)*	• Recipient	Are services responsive to your changing circumstances and/or condition?
Recipient is knowledgeable of their choice in providers and services and their rights to change and direct staff. *(II.A.3)*	• Recipient	Do you know that you can change providers and change or direct your staff?
Recipients and caregiver(s) experience stability and continuity in staff. *(VI.A)*	• Recipient	How often do you experience staff turnover?
Recipient is able to contact their care coordinator as needed. *(II.A.3)*	• Recipient	Does your care coordinator make him/herself available to you during reasonable times of the day such as regular business hours?
Recipients have a choice in the staff that serves them. *(VI.A)*	• Recipient	Did the recipient and caregiver(s) help choose the direct service staff?
Recipients and caregiver(s) feel that the services are adequate to meet current needs. *(II.B.1) (III.C) (VI.B)*	• Recipient	Are the paid services and natural supports enough to meet your current needs?
Recipients and caregivers are treated with dignity and respect by	• Recipient	Do you feel that you are treated with dignity and respect by your

service providers. *(III.C)*		service providers?
Systems are in place to safeguard recipients, prevent accidents and address safety issues. *(IV.A) (IV.C)*	• Recipient	Inquiries regarding egress, emergency, accessibility, DME, and Environmental Modification needs and current systems in place.
Provider fosters recipient participation in the decisions concerning their own care. *(V.B)*	• Recipient	Were recipient's goals, needs, and abilities gathered and used in the development of the Plan of Care? Did recipient participate in planning his/her own services?
Provider informs the recipient about the due process and their agency grievance policy. *(V.D) (V.E)*	• Recipient	What steps or actions do you take if you are unhappy with a direct service staff or a service being provided by this agency?
Recipients experience greater community integration as a result of services. *(VI.B)*	• Recipient	Do you get out into the community as a result of the services that you receive? Do you experience greater community integration as a result of services?
Services support individual's self-determination and independence. *(VI.B)*	• Recipient	Do you feel like you have a say in your services and care being provided to you? Have you gained independence as a result of the services that you receive?
Recipients are able to participate in performance evaluations, satisfaction surveys, and quality assurance activities. *(VII.D)*	• Recipient	Does the agency give you an opportunity to participate in performance evaluations, satisfaction surveys, and quality assurance activities?
Services are furnished in accordance to the Plan of Care and recipient reports satisfaction with the achievement of the goals in the Plan of Care. *(II.B.2) (III.C) (VI.B)*	• Recipient	Did you receive a copy of your Plan of Care? Are services provided in accordance to your Plan of Care and are the stated goals achieved?
Provider makes effort to accommodate recipients' cultural and ethnic background. *(VII.C)*	• Recipient	Does the provider make an effort to accommodate your cultural and ethnic background and preferences?

OVERVIEW OF QUALITY FRAMEWORK

FOCUS I: RECIPIENT ACCESS

Desired Outcome: Recipients have access to personal care assistance and home and community based services and supports in their communities.

I.A Information/Referral
Desired Outcome: Recipients and families can readily obtain information concerning the availability of HCBS and/or PCA services, information regarding the application process and referral.

I.B Intake and Eligibility
I.B.1 User-Friendly Processes
Desired Outcome: Intake and eligibility determination processes are understandable and user-friendly to recipients and families and there is assistance available in applying for HCBS and/or PCA.

I.B.2 Referral to Community Resources
Desired outcome: Recipients who need services but are not eligible for HCBS and/or PCA are linked to other community resources.

I.B.3 Individual Choice of HCBS
Desired Outcome: Each individual is given timely information about available services to exercise his or her choice in selecting between HCBS and institutional services.

I.B.4 Prompt Initiation
Desired Outcome: Services are initiated promptly when the individual is determined eligible and selects HCBS and/or PCA.

FOCUS II: RECIPIENT CENTERED SERVICE PLANNING AND DELIVERY:

Desired Outcome: Services and supports are planned and effectively implemented in accordance with each recipient's unique needs, expressed preferences and decisions concerning his/her life in the community.

II.A Recipient-Centered Service Planning
II.A.1 Assessment
Desired Outcome: Comprehensive information concerning each recipient's preferences and personal goals, needs and abilities, health status and other available supports is gathered and used in developing a personalized service plan.

II.A.2 Recipient Decision Making
Desired Outcome: Information and support is available to help recipients make informed selections among service options.

II.A.3 Free Choice of Providers
Desired Outcome: Information and support is available to assist recipients to freely choose among qualified providers.

II.A.4 Service Plan
Desired Outcome: Each recipient's plan comprehensively addresses his or her identified need for HCBS, health care and other services in accordance with his or her expressed personal preferences and goals.

II.A.5 Recipient Direction
Desired Outcome: Recipients have the authority and are supported to direct and manage their own services to the extent they wish.

II.B Service Delivery
II.B.1 Ongoing Service and Support Coordination
Desired Outcome: Recipients have continuous access to assistance as needed to obtain and coordinate services and promptly address issues encountered in community living.

II.B.2 Service Provision
Desired Outcome: Services are furnished in accordance with the recipient's plan.
II.B.3 Ongoing Monitoring
Desired Outcome: Regular, systematic and objective methods – including obtaining the recipient's feedback – are used to monitor the individual's well being, health status, and the effectiveness of HCBS and/or PCA in enabling the individual to achieve his or her personal goals
II.B.4 Responsiveness to Changing Needs
Desired Outcome: Significant changes in the recipient's needs or circumstances promptly trigger consideration of modifications in his or her plan.

FOCUS III: PROVIDER CAPACITY AND CAPABILITIES:

Desired Outcome: There are sufficient HCBS and/or PCA providers and they possess and demonstrate the capability to effectively serve recipients.

III.A Provider Networks and Availability
Desired Outcome: There are sufficient qualified provider and individual providers to meet the needs of recipients in their communities.
III.B Provider Qualifications
Desired Outcome: All HCBS and/or PCA provider and individual providers possess the required skills, competencies and qualifications to support recipients effectively.
III.C Provider Performance
Desired Outcome: All HCBS and/or PCA providers demonstrate the ability to provide services and supports in an effective and efficient manner consistent with the individual's plan.

FOCUS IV: RECIPIENT SAFEGUARDS:

Desired Outcome: Recipients are safe and secure in their homes and communities, taking into account their informed and expressed choices.

IV.A Risk and Safety Planning
Desired Outcome: Recipient health risk and safety considerations are assessed and potential interventions identified that promote health, independence and safety with the informed involvement of the recipient.
IV.B Critical Incident Management
Desired Outcome: There are systematic safeguards in place to protect recipients from critical incidents and other life-endangering situations.
IV.C Housing and Environment
Desired Outcome: The safety and security of the recipient's living arrangement is assessed, risk factors are identified and modifications are offered to promote independence and safety in the home.
IV.D Behavior Interventions
Desired Outcome: Behavior interventions – including chemical and physical restraints – are only used as a last resort and subject to rigorous oversight.
IV.E Medication Management
Desired Outcome: Medications are managed effectively and appropriately.
IV.F Natural Disasters and Other Public Emergencies
Desired Outcome: There are safeguards in place to protect and support recipients in the event of natural disasters or other public emergencies.

Desired Outcome: Recipients receive support to exercise their rights and in accepting personal responsibilities.

V.A Civic and Human Rights
Desired Outcome: Recipients are informed of and supported to freely exercise their fundamental constitutional and federal or state statutory rights.

V.B Recipient Decision Making Authority
Desired Outcome: Recipients receive training and support to exercise and maintain their own decision-making authority.

V.C Due Process
Desired Outcome: Recipients are informed of and supported to freely exercise their Medicaid due process rights.

V.D Grievances
Desired Outcome: Recipients are informed of how to register grievances and complaints and supported in seeking their resolution. Grievances and complaints are resolved in a timely fashion.

Desired Outcome: Recipients are satisfied with their services and achieve desired outcomes.

VI.A Recipient Satisfaction
Desired Outcome: Recipients and family members, as appropriate, express satisfaction with their services and supports.

VI.B Recipient Outcomes
Desired Outcome: Services and supports lead to positive outcomes for each recipient.

Desired Outcome: The system supports recipients efficiently and effectively and constantly strives to improve quality.

VII.A System Performance Appraisal
Desired Outcome: The service system promotes the effective and efficient provision of services and supports by engaging in systematic data collection and analysis of provider performance and impact.

VII.B Quality Improvement
Desired Outcome: There is a systemic approach to the continuous improvement of quality in the provision of HCBS.

VII.C Cultural Competency
Desired Outcome: The HCBS system effectively supports recipients of diverse cultural and ethnic backgrounds.

VII.D Recipient and Stakeholder Involvement
Desired Outcome: Recipients and other stakeholders have an active role in program design, performance appraisal, and quality improvement activities.

VII. E Financial Integrity
Desired Outcome: Financial accountability is assured, services are billed in accordance to program requirements and payments are made promptly.

Choices for Care Interim Quality Plan Outcomes and Indicators

FOCUS I: Recipient Access

Outcome	Indicator(s)	Data Source	Data Collection Method
I.A Information/Referral Desired Outcome: Recipients and families can readily obtain information concerning availability of services, application for services and referrals to additional services.	There exists a formal process for dissemination of accessible recipient-friendly program materials and information.	• Administrative Staff • Recipients	• Administrative Employee Interview • Recipient Interview
I.B.1a User-Friendly Processes Desired Outcome: Intake and eligibility determination processes are understandable and user-friendly to recipients and families and assistance is available in applying for services.	Service Provider has made concerted efforts to make intake and eligibility processes understandable.	• Administrative Staff • Recipients	• Administrative Employee Interview • Recipient Interview
	Service provider is available to answer questions during the application process	• Administrative Staff • Recipient	• Administrative Employee Interview • Recipient Interview
I.B.1b Eligibility Determination Desired Outcome: Each individual's need and eligibility for services are assessed and promptly determined.	There exists a typical timeline from recipient referral/intake to provision of services. POC is developed promptly after receiving LOC.	• Administrative Staff • Recipient Records • SDS Records	• Administrative Employee Interview • Recipient Records Review • Desk Prep/ Case Record Review • Care Coordination Worksheet
I.B.2 Referral to Community Resources Desired Outcome: Recipients who need services but are not eligible are linked to other community resources.	Recipients that are not appropriate for the services are referred elsewhere.	• Administrative Staff	• Administrative Employee Interview
I.B.3 Individual Choice of HCBS Desired Outcome: To enable recipients to exercise their choice between home-based and institutional services, information is provided in a timely manner.	Service provider offers information about a wide variety of services available within the community.	• Administrative Staff • Recipients • Recipient Records	• Administrative Employee Interview • Recipient Interview • Recipient Records Review
I.B.4 Prompt Initiation Desired Outcome: Services are initiated promptly when the individual is determined eligible and selects services.	Services are delivered promptly after they are authorized.	• Recipient Records • Administrative Staff • SDS Records	• Recipient Records Review • Administrative Employee Interview • Desk Prep/ Case Record Review

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[1] The Centers for Medicare and Medicaid Services Quality Framework identifies expectations for a state's quality management activities. The Outcome areas in this Provider Review Protocol are numbered according to the corresponding outcome identified in the CMS Quality Framework

Focus II A: Recipient-Centered Service Planning and Delivery

Outcome	Indicator(s)	Data Source	Data Collection Method
II.A.1 Assessment Desired Outcome: Comprehensive information concerning each recipient's preferences, personal goals, needs, abilities, health status and available supports is gathered and used in developing a personalized service plan.	Recipient preferences, personal goals, needs, and abilities are gathered and used in developing the service plan.	• Recipient • Care Coordinator • SDS Records	• Recipient Interview • Care Coordination Worksheet • Desk Prep/ Case Record Review
	The assessment is updated at least annually, or when there is a significant change in the individual's condition or circumstances	• Care Coordinator • Recipient Records • Recipient • SDS Records	• Care Coordination Worksheet • Recipient Records Review • Recipient Interview • Desk Prep/ Case Record Review
II.A.2 Recipient Decision Making Desired Outcome: Information and support is available to help recipients make informed selections among service options.	Service provider offers information about a wide variety of services available within the community.	• Care Coordinator • Recipients • Recipient Records	• Care Coordination Worksheet • Recipient Interview • Recipient Records Review
II.A.3 Free Choice of Providers Desired Outcome: Information and support is available to assist recipients to freely choose among qualified providers	The recipient is informed of his/her right to change providers and/or staff. Provider ensured that recipients can exercise choice in providers and services available in the community.	• Recipients • Recipient Records • Care Coordinator • Administrative Staff	• Recipient Interview • Recipient Records Review • Care Coordination Worksheet • Administrative Employee Interview
II.A.4 Service Plan Desired Outcome: Each recipient's plan comprehensively addresses his or her identified need for service, health care and other services in accordance with their other expressed personal preferences and goals.	The Care Coordination plan addresses: issues and goals identified in the assessment, the person(s) responsible for each task, and the target date for the completion of each issue or goal.	• Recipient Records • Care Coordinator • SDS Records	• Recipient Records Review • Care Coordination Worksheet • Desk Prep/ Case Record Review
	The service plan/POC is updated at the annual reassessment or more frequently if there is a significant change in the individual's condition or circumstance.	• Care Coordination • Recipient Records • Recipient • SDS Records	• Care Coordination Worksheet • Recipient Records Review • Recipient Interview • Desk Prep/ Case Record Review
	Individual indicates that services comprehensively address his/her needs, preferences, and goals.	• Recipient	• Recipient Interview
II.A.5 Recipient Direction Desired Outcome: Recipients have the authority and are supported to direct and manage their own services to the extent they wish.	Provider ensures that recipients are aware of their rights and responsibilities.	• Administrative Staff • Recipient • Recipient Records	• Administrative Employee Interview • Recipient Interview • Recipient Records Review

FOCUS II B: Service Delivery

Outcome	Indicator(s)	Data Source	Data Collection Method
II.B.1 Ongoing Service and Support Coordination Recipients have access to assistance when needed to obtain and coordinate services and to promptly address issues encountered in community living.	The recipient is able to contact his/her care coordinator as needed.	• Care Coordinator • Recipients	• Recipient Interview • Care Coordination Worksheet
II.B.2 Service Provision Desired Outcome: Services are furnished in accordance with the recipient's plan.	Services are provided in accordance with written service plan.	• Recipient Records • Claims Data/Plan of Care • Direct Service Staff	• Recipient Records Review • Desk Prep/Case Records Review • Direct Service Staff Interview
	Service providers involved with an individual recipient have regular contact to coordinate services.	• Recipient • Administrative Staff	• Recipient Interview • Administrative Employee Interview
	Recipients have a choice in the staff that serves them.	• Recipient • Administrative Staff	• Recipient Interviews • Administrative Employee Interview
II.B.3 Ongoing Monitoring Regular objective and systematic methods including recipient feedback are employed when monitoring the effectiveness of services, health status, and an individual's well-being.	Recipient satisfaction with services data is collected on a regular basis.	• Certification and Recertification Packet • Administrative Staff	• Desk Prep • Administrative Employee Interview
	Providers regularly collaborate among themselves in order to monitor recipient's progress and well-being.	• Administrative Staff • Recipient Records • Care Coordinator	• Administrative Employee Interview • Recipient Records Review • Care Coordination Worksheet
II.B.4 Responsiveness to Changing Needs Desired Outcome: Significant changes in the recipient's needs or circumstances promptly trigger consideration of modifications in his or her plan.	Staff and services are responsive to changing circumstances and condition.	• Administrative Staff • Recipient • Recipient Records • Care Coordinator	• Administrative Employee Interview • Recipient Interview • Recipient Records Review • Care Coordination Worksheet

FOCUS III: Provider Capacity and Capabilities

Outcome	Indicator(s)	Data Source	Data Collection Method
III.A Provider Networks and Availability Desired Outcome: There are sufficient qualified provider and individual providers to meet the needs of recipients in their communities	Provider takes steps to ensure that its employee turnover is low.	• Administrative Staff • Direct Service Staff	• Administrative Employees Interview • Direct Service Employees Interviews
III.B Provider Qualification All HCBW service providers and individual providers possess the appropriate skills and qualifications to effectively support recipients.	All licenses and certifications are current and kept on file.	• Certification and Recertification Packet	• Desk Prep
	General and recipient specific training is provided on a regular basis.	• Employee Records • Direct Service Staff • Administrative Staff	• Employee Records Review • Direct Service Employees Interview • Administrative Employees Interviews
	Staff at all levels receives supervision.	• Employee Records • Direct Service Staff • Administrative Staff	• Employee Records Review • Direct Service Employees Interview • Administrative Employees Interview
III.C Provider Performance Desired Outcome: Service providers demonstrate the ability to provide services and supports in an effective and efficient manner consistent with the individual's plan.	Services meet the recipient's needs.	• Recipient	• Recipient Interview
	Recipients are treated with dignity and respect.	• Recipient	• Recipient Interview
	Providers are knowledgeable regarding the intent of services and their ability to perform these services.	• Direct Service Staff • Administrative Staff	• Direct Service Employees Interview • Administrative Employees Interview
	Recipients report satisfaction with achievement of goals in their POC.	• Recipient	• Recipient Interview

FOCUS IV: Participant Safeguards

Outcome	Indicator(s)	Data Source	Data Collection Method
IV.A Risk and Safety Planning Desired Outcome: Risk and safety considerations are identified and potential interventions considered that promote independence and safety.	Service Plan reflects recipient's needs for safety and welfare.	• Care Coordinator • Recipient Records • Recipient	• Care Coordination Worksheet • Recipient Records Review • Recipient Interview
IV.B Critical Incident Management Desired Outcome: There are systematic safeguards in place to protect recipients from critical incidents and other life-endangering situations.	Service provider has critical incident policies and implements procedures to collect, report, and respond to critical incidents and suspected abuse.	• Certification and Recertification Packets • Critical Incident Database • Administrative Staff	• Desk Prep • Administrative Employee Interview
	Service provider follows SDS Background check policy for all employees.	• Administrative Staff • Certification and Recertification • Employee Records	• Administrative Employee Interview • Desk Prep • Employee Records Review
	Staff is trained in ways to reduce and assess recipient risk.	• Employee Records • Administrative Staff • Direct Service Staff	• Employee Records Review • Administrative Employee Interview • Direct Service Employee Interview
	Service providers have evidence that policy regarding Mandatory reporting requirements of suspected abuse, neglect and exploitation of recipients is trained and implemented.	• Administrative Staff • Direct Service Staff • Certification and Recertification • Employee Records	• Administrative Employee Interview • Direct Service Employee Interview • Desk Prep • Employee Records Review
IV.C Housing and Environment Desired Outcome: The safety and security of the recipient's living arrangement is assessed, risk factors are identified and modifications are offered to promote independence and safety in the home.	Health and safety of the recipient's living arrangements are assessed on a regular basis.	• Recipient Records • Direct Service Staff • Administrative Staff • Care Coordinator • Recipient	• Recipient Records Reviews • Direct Service Employee Interview • Administrative Employee Interview • Care Coordination Worksheet • Recipient Interview
	Recipient needs for assistive devices or e- mods are met.	• Recipient • Recipient Records	• Recipient Interview • Recipient Records Review
IV.D Behavior Interventions Desired Outcome: Behavior interventions are only used as a last resort.	The provider has comprehensive written procedures regarding the use of restraints.	• Administrative Staff	• Use of Intervention and Physical Restraint Worksheet
IV.E. Medication Management Desired Outcome: Medications are managed effectively and appropriately	When administration of meds is delegated, the delegating nurse provides good written instructions	• Health-related services allowed in ALH worksheet	• Recipient Records Reviews • Direct Service Staff Interview • Administrative Staff Interview

| IV.F. Natural Disasters and Other Public Emergencies Desired Outcome: There are safeguards in place to protect and support recipients in the event of natural disasters or emergencies. | The provider has an emergency response and recovery plan. | • Certification and Recertification Packet
• Administrative Staff | • Desk Prep

• Administrative Staff Interview |

FOCUS V: Participants Rights and Responsibilities

Outcome	Indicator(s)	Data Source	Data Collection Method
V.A. Civic and Human Rights Desired Outcome: Recipients are informed of and supported to freely exercise their fundamental constitutional, federal and state rights.	Recipients and caregiver(s) are informed about their rights, responsibilities and grievance procedures and are familiar with the Client Rights Form	• Recipient Records • Recipient	• Recipient Records Review • Recipient Interview
V.B. Recipient Decision Making Authority Desired Outcome: Recipients receive training and support to exercise and maintain their own decision-making authority.	Provider fosters recipient participation in the decisions concerning their own care.	• Recipient Records • Administrative Staff • Direct Service Staff • Recipients	• Recipient Records Reviews • Administrative Staff Interviews • Direct Service Staff Interviews • Recipients Interview
V.C. Alternate Decision Making A decision to seek guardianship, surrogate or other mechanisms for a recipient is considered only after a determination is made that considered less intrusive measures.	Record shows provider made an effort to explain the decision to waive their right to actively participate in their own care to the recipient and provided appropriate referral.	• Recipient Records • Direct Service Staff • Administrative Staff	• Recipient Records Reviews • Direct Service Staff Interviews • Administrative Staff Interviews
V.D Due Process Desired Outcome: Recipients are informed of and supported to freely exercise their Medicaid due process rights.	Provider informs the recipient about their due process rights and recipients are familiar with the Waiver Program Notices of Action, Appeals and Hearings.	• Recipient • Care Coordinator • Recipient Records	• Recipient Interview • Care Coordination Worksheet • Recipient Records Review
V.E. Grievances Recipients are informed about, and receive support, during the complaint and grievance process. Grievances are resolved in a timely manner.	Provider informs the recipient about grievance procedures.	• Recipient • Care Coordinator • Recipient Records • Administrative Staff	• Recipient Interview • Care Coordination Worksheet • Recipient Records Review • Administrative Staff Interviews

Focus VI: Participants Outcomes and Satisfaction

Outcome	Indicator(s)	Data Source	Data Collection Method
VI.A. Recipient Satisfaction Recipients and family members express satisfaction with their services and supports.	Provider employs a system for recording and responding to recipient feedback.	• Certification and Recertification Packets • Administrative Staff • Recipient	• Certification and Recertification Packets Review • Administrative Employee Interview • Recipient Interview
	Recipients express satisfaction with their services and supports.	• Recipient • Certification and Recertification Packets • Administrative Staff	• Recipient Interviews • Desk Prep • Administrative Staff Interview
VI.B Recipient Outcomes Desired Outcome: Services and supports lead to positive outcomes for each recipient.	Services will support individual self-determination and independence.	• Recipient	• Recipient Interview
	Services facilitate recipient achievement of goals as outlined in their plan.	• Recipient • Recipient Records • Administrative Staff	• Recipient Interview • Recipient Records Review • Administrative Staff Interview
	Recipient's needs are met with regard to community involvement.	• Recipient • Recipient Records • Administrative Staff	• Recipient Interview • Recipient Records Review • Administrative Staff Interview
	Recipient's needs are met with regards to services received.	• Recipient • Recipient Records	• Recipient Interview • Recipient Records Review

FOCUS: VII: System Performance

Outcome	Indicator(s)	Data Source	Data Collection Method
VII.A System Performance Appraisal The service provider engages in systematic data collection and analysis of program performances and impact leading to an effective and efficient service delivery.	Provider regularly engages in systematic performance appraisal.	• Certification and Recertification Packets • Administrative Staff • Direct Service Staff	• Desk Prep • Administrative Employee Interview • Direct Service Staff Interview
VII.B Quality Improvement Desired Outcome: There is a systemic approach to the continuous improvement of quality in the provision of services.	Provider engages in quality improvement activities regularly.	• Certification and Recertification Packets • Administrative Staff • Direct Service Staff • Employee Records	• Desk Prep • Administrative Employee Interview • Direct Service Staff Interview • Employee Records Review
VII.C Cultural Competency Grant, PCA and waiver service providers effectively support recipients of diverse cultural and ethnic backgrounds.	The provider makes efforts to accommodate recipient cultural and ethnic backgrounds.	• Administrative Staff • Certification and Recertification Packets • Direct Service Staff • Recipient	• Administrative Employee Interview • Desk Prep • Direct Service Staff Interview • Recipient Interview
VII.D Recipient and Stakeholder Involvement Desired Outcome: Recipients and other stakeholders have an active role in program design, performance appraisal, and quality improvement activities.	Recipients are able to participate in staff performance evaluations, satisfaction surveys, quality improvement activities and in the design of new programs.	• Administrative Staff • Recipient	• Administrative Employee Interview • Recipient Interview
VII.E Financial Integrity Desired Outcome: Services are billed in accordance with program requirements.	Services are well documented and provider submits claims accurately for services that were performed.	• Claim Processing • Recipient Records • Administrative Staff • Billing Staff	• Desk Prep • Recipient Records Review • Administrative Employee Interview • Claims Worksheet
	Staff is trained regarding False Claims Act for agency that bill $5 million or more annually.	• Administrative Staff • Direct Service Staff	• Administrative Employee Interview • Direct Service Staff Interview